	1 10165	/ ·	Paper No.:
DATE	6/2/08		
TO SPE O	F : ART UNIT	37	
SUBJECT	: Request for Certificate of	Correction on Patent No.: 6780	583
A response	is requested with respect to	the accompanying request for a certification	cate of correction.
Please con	nplete this form and return	n with file, within 7 days to:	
Palm location	on 7580, Certificates of	Correction Branch – South Tower	
If response MADRAS.	is for an IFW, return to e	employee (named below) via PUB	SCofC Team in
With respect	to the change(s) requested	d, correcting Office and/or Applicant's e	rrors, should the
patent read a	as shown in the certificate or ope or meaning of the claims b	f correction (COCIN)? No new matter st	ould be introduced, a
·		/ Valerie J	ackson
~			
Thank You Fo	or Your Assistance		Correction Branch
		rei. No. 703-	308-9390 ext. 11
			·
The reques	n on the appropriate box.	identified correction(s) is hereby:	· · · · · · · · · · · · · · · · · · ·
The reques	et for issuing the above-in on the appropriate box. Approved	identified correction(s) is hereby: All changes apply.	
The reques	n on the appropriate box. Approved		
Note your decision	n on the appropriate box. Approved	All changes apply.	es do not apply.
Note your decision	Approved Approved in Part Denied	All changes apply. Specify below which chang	es do not apply.
Note your decision	Approved Approved in Part Denied	All changes apply. Specify below which chang	es do not apply.
Note your decision	Approved Approved in Part Denied	All changes apply. Specify below which chang	es do not apply.
Note your decision	Approved Approved in Part Denied	All changes apply. Specify below which chang	es do not apply.
Note your decision	Approved Approved in Part Denied	All changes apply. Specify below which chang State the reasons for denia	es do not apply.
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Note your decision	Approved Approved in Part Denied	All changes apply. Specify below which chang State the reasons for denia	es do not apply.